

IAP20 Rec'd PCT/PTO 09 FEB 2006

Application Data Sheet

Application Information

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|-------------------------------------|--|
| Application Type:: | National Stage |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | None |
| Computer Readable Form (CRF):: | No |
| Number of copies of CRF:: | 0 |
| Title:: | STILBENE DERIVATIVES AND THEIR USE IN MEDICAMENTS |
| Attorney Docket Number:: | 4301-1156 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 5 |
| Small Entity?:: | No |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Gov't Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: AUSTRIA
Status:: Full Capacity
Given Name:: THOMAS
Middle Name::
Family Name:: SZEKERES
Name Suffix::
City of Residence:: WIEN
State or Province of
Residence::
Country of Residence:: AUSTRIA
Street of Mailing GUGITZGASSE 8/41
Address::
City of Mailing Address:: WIEN
State or Province of Mailing Address::
Country of Mailing Address:: AUSTRIA
Postal or Zip Code of Mailing Address:: A-1190

Applicant Authority Type:: Inventor
Primary Citizenship Country:: AUSTRIA
Status:: Full Capacity
Given Name:: NORBERT
Middle Name::
Family Name:: HANDLER
Name Suffix::
City of Residence:: WIEN
State or Province of
Residence::
Country of Residence:: AUSTRIA
Street of Mailing GUMPENDORFERSTRAÙE 51/16
Address::
City of Mailing Address:: WIEN

State or Province of Mailing Address::
Country of Mailing Address:: AUSTRIA
Postal or Zip Code of Mailing Address:: A-1060

Applicant Authority Type:: Inventor
Primary Citizenship Country:: AUSTRIA
Status:: Full Capacity
Given Name:: WALTER
Middle Name::
Family Name:: JAGER
Name Suffix::
City of Residence:: PRESSBAUM
State or Province of
Residence::
Country of Residence:: AUSTRIA
Street of Mailing SUMER SIEDLUNG 27
Address::
City of Mailing Address:: PRESSBAUM
State or Province of Mailing Address::
Country of Mailing Address:: AUSTRIA
Postal or Zip Code of Mailing Address:: A-3021

Applicant Authority Type:: Inventor
Primary Citizenship Country:: AUSTRIA
Status:: Full Capacity
Given Name:: ARKADIUSZ
Middle Name:: MAREK
Family Name:: MURIAS
Name Suffix::
City of Residence:: WIEN
State or Province of
Residence::
Country of Residence:: AUSTRIA
Street of Mailing GARNISONGASSE 14-16

Address::

City of Mailing Address:: WIEN

State or Province of Mailing Address::

Country of Mailing Address:: AUSTRIA

Postal or Zip Code of Mailing Address:: A-1090

Applicant Authority Type:: Inventor

Primary Citizenship Country:: AUSTRIA

Status:: Full Capacity

Given Name:: THOMAS

Middle Name::

Family Name:: ERKER

Name Suffix::

City of Residence:: WIEN

State or Province of

Residence::

Country of Residence:: AUSTRIA

Street of Mailing HEINRICH COLLIN STRAßE 29-31/14

Address::

City of Mailing Address:: WIEN

State or Province of Mailing Address::

Country of Mailing Address:: AUSTRIA

Postal or Zip Code of Mailing Address:: A-1140

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

| | |
|-------------------------|-------|
| Representative Customer | 00466 |
| Number:: | |

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|----------------------|-------------------------|-------------------------|
| This application | National Stage of | PCT/AT2004/000279 | 8/9/04 |
| | | | |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|-------------------------|---------------|-----------------------|
| AUSTRIA | A 1285/2003 | 8/14/03 | Yes |
| | | | |

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::